Entered -9-24-99 - sb CL 99L0604 - GWENDOLYN BURNS

01- R-1039

CLAIM OF:

ERBY WALKER 4284 Kimball Road, SW Atlanta, Georgia 30331

For damages alleged to have been sustained from an automobile accident on August 23, 1999 at 5320 Campbellton Road, SW.

THIS ADVERSED REPORT IS APPROVED

BY: POSALIND PUBENS NEWELL

DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

| Claim No | 99L0604 | | Date: <u>June 27, 2001</u> | | | | |
|--------------|---|-------------------------|----------------------------|---|------------------|-----------------|--|
| | | | | | | | |
| | | */ **/ | | | | | |
| | /ictimERB | | | | | | |
| BY: (Atty) | (Ins. Co.) | CTT Adams Commis | 20221 | | | | |
| Address: | 4289 Kimball Road, | SW, Atlanta, Georgia | 1.694.00 | Podily I | nium C | | |
| Subrogation | n: Claim for | Property damage 5_ | 1,084.00 | Bodity i | Improper | | |
| Date of Not | tice: 9/1/99 | Method: v | vritten, Proper | A 1 is (6 M | mproper | | |
| Conforms to | o Notice: 0.C.G.A. §3 currence 8/23/99 | 6-33-5 | X | Ante Litem (o M | Rood SW | | |
| Date of Occ | currence <u>8/23/99</u> | | Place: | 5320 Campoemon R | coad, SW | | |
| Donortmani | PITRIIC WORK | S | Division | Solid waste Serv | rices | | |
| Employee i | nvolved | | Disciplir | nary Action: | | | |
| | on or and office | | elead wahiala w | vac etmick by a city s | sanitation vehic | e However, the | |
| NATURE (| OF CLAIM: Claims | int alleges that his pa | rked veincie w | as siluck by a city s | Samuation veine | o. However, the | |
| claimant ha | s failed to pursue his c | aim. | | | | | |
| | | | | | | | |
| | 2 · TION | | | | | | |
| INVESTIC | JATION: | | | | | | |
| G | : City employee | Claimant | Others | Writte | n | Oral | |
| Statements | : City employee Diagrams | Penorte: Po | lice | Dent Report | Oth | er X | |
| Pictures | Diagrams tions issued: City Driv | Reports. 1 o. | Claima | Dept Report | | | |
| Traffic cita | sposition: City Driver | /er | Claima | nt Driver | | | |
| Citation di | sposition: City Driver | | Claimai | It Dilver | | | |
| D 4 010 OT | | ON. | | | | | |
| BASIS OF | F RECOMMENDATI | ON: | | | | | |
| Enmation. | Governmental | Y | Minister | rial | | | |
| T | Tation M. | are than Siv Months | () | ther X Dan | nages reasonadi | - | |
| Improper I | volved | | ejected | Compromis | e settlement | | |
| City not in | lacement by Ins. Co | Once it | Renair | replacement by City | v Forces | | |
| Repair/rep | Negligent | City Negligent | Y Join | Clai | im Abandoned | X | |
| Claimant F | Negligent | City Negligent | | · O.G. | | | |
| | | | Rest | pectfully submitted, | | | |
| | | | 1001 | | (| | |
| | | | | 10 | 1 1 | \checkmark | |
| | | | | M_{\sim} | $l_0 l_1 = l_1$ | \mathcal{M} | |
| | | | 1 | TUDA O | acy_ | | |
| | | | / niv | ESTIGATOR - GW | ENDOLYN BU | IRNS | |
| | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| DECOM | MENDATION: / | | | | | | |
| RECOM | MENDATION. | | _ | | | | |
| D € | (X) | Adverse X | Account ch | arged: 1A01 | 2J01 | 2H01 | |
| Pay \$ | | a Man I Louis | | Concur/date 06 | -2801 | | |
| Claims Ma | | | | il Action | | | |
| Committe | e Action: | | | | | | |
| =0P: | . / | | | | | | |
| FORM 23-6 | I | | | | | | |